

Reimbursable meals served to infants, children, or adult participants in the Child and Adult Care Food Program

shall contain (**as a minimum**) the indicated meal pattern quantities and food components.

## INFANT CARE MEAL PATTERN

Meals served to infants ages birth through 11 months must meet the requirements described in this meal pattern. Foods included in the infant meal must be of a texture and a consistency that are appropriate for the age of the infant being served. Either breast milk or iron-fortified infant formula must be served for the entire first year.

| Age                           | Breakfast   | Lunch or Supper  | Snack  |
|-------------------------------|---|--|--|
| Birth through 3 months        | 4-6 fluid ounces breast milk* or formula**  | 4-6 fluid ounces breast milk* or formula**   | 4-6 fluid ounces breast milk* or formula**   |
| 4 months through 7 months     | 4-8 fluid ounces breast milk* or formula**<br><br>0-3 tablespoons infant cereal***  | 4-8 fluid ounces breast milk* or formula** and<br><br>0-3 tablespoons infant cereal*** and<br><br>0-3 tablespoons fruit or vegetable or both   | 4-6 fluid ounces breast milk* or formula**   |
| 8 months up to first birthday | 6-8 fluid ounces breast milk* or formula**<br><br>and<br><br>2-4 tablespoons infant cereal<br><br>and<br><br>1-4 tablespoons fruit and/or vegetable or both | 6-8 fluid ounces breast milk* or formula** and<br><br>2-4 tablespoons infant cereal*** and/or<br><br>1-4 tablespoons meat, fish, poultry, egg yolk, or cooked dry beans or peas, or ½ - 2 ounces cheese, or 1-4 tablespoons cottage cheese, cheese food, or cheese spread and 1-4 tablespoons fruit or vegetable or both | 2-4 fluid ounces breast milk* or formula** or fruit juice****<br><br>and<br><br>0-1/2 slice bread or 0-2 crackers***** |

\* It is recommended that breast milk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry

\*\* Iron-fortified infant formula

- \*\*\* Iron-fortified dry infant cereal
- \*\*\*\* Full-strength fruit juice
- \*\*\*\*\* Made from whole-grain or enriched meal or flour

## CHILD CARE MEAL PATTERN

When children over age one participate in the Program, the total amount of food authorized in the meal pattern set forth below shall be provided in order to qualify for reimbursement. Children age 12 and up may be served adult-size portions based on the greater food needs of older children, but shall be served not less than the minimum quantities specified in this section for children age 6 through 12 years. For purposes of the requirements outlined in this paragraph, a cup means a standard measuring cup.

Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

| <b>Breakfast</b>   | <b>Children<br/>1 and 2<br/>years</b>  | <b>Children<br/>3 through 5<br/>years</b>  | <b>Children<br/>6 through 12<br/>years</b>   |
|--|--|--|--|
| <b>Milk, fluid</b><br><b>Juice or fruit or vegetable</b><br><b>Bread, bread</b><br><b>alternate**** and/or</b><br><b>cereal</b><br>enriched or whole grain<br>Bread or<br>Cereal: Cold dry or<br>Hot cooked  | ½ cup (4 ounces)<br>¼ cup<br><br>½ slice (½ ounce)<br>¼ cup*<br>¼ cup                                | ¾ cup (6 ounces)<br>½ cup<br><br>½ slice (½ ounce)<br>1/3 cup**<br>¼ cup                                     | 1 cup (8 ounces)<br>½ cup<br><br>1 slice (1 ounce)<br>¾ cup***<br>½ cup                                |
| <b>AM or PM snack (supplement)</b>   |  |  |  |
| (select 2 of these 4 components)<br><b>Milk, fluid</b><br><b>Meat or meat alternate</b><br><b>Juice or fruit or vegetable</b><br><b>Bread, bread</b><br><b>alternate**** and/or</b><br><b>cereal</b><br>enriched or whole grain<br>Bread or<br>Cereal: Cold dry or<br>Hot cooked                       | ½ cup (4 ounces)<br>½ ounce<br>½ cup<br><br>½ slice (½ ounce)<br>¼ cup*<br>¼ cup                     | ½ cup (4 ounces)<br>½ ounce<br>½ cup<br><br>½ slice (½ ounce)<br>1/3 cup**<br>¼ cup                          | 1 cup (8 ounces)<br>1 ounce<br>¾ cup<br><br>1 slice (1 ounce)<br>¾ cup***<br>½ cup                     |
| <b>Lunch or Supper</b>   |  |  |  |
| <b>Milk, fluid</b><br><b>Meat or meat alternate</b><br>(lean meat or poultry or fish)<br>Cheese<br>Egg<br>Cooked dry beans or peas<br>Peanut butter<br>Yogurt (plain or flavored)<br>(Or an equivalent quantity of any combination of the above meat/meat alternates)<br><b>Vegetable and/or fruit</b> | ½ cup (4 ounces)<br><br>1 ounce<br>1 ounce<br>1 large egg<br>¼ cup<br>2 tbsps.<br>½ cup<br><br>¼ cup | ¾ cup (6 ounces)<br><br>1 ½ ounces<br>1 ½ ounces<br>1 large egg<br>3/8 cup<br>3 tbsps.<br>¾ cup<br><br>½ cup | 1 cup (8 ounces)<br><br>2 ounces<br>2 ounces<br>1 large egg<br>½ cup<br>4 tbsps.<br>1 cup<br><br>¾ cup |

|   |                      |                      |                      |
|---|----------------------|----------------------|----------------------|
| (total of <u>two</u> or more)<br><b>Bread or bread</b><br><b>alternate****</b><br>enriched or whole grain | ½ slice (½<br>ounce) | ½ slice (½<br>ounce) | 1 slice (1<br>ounce) |
|---|----------------------|----------------------|----------------------|

\* ¼ cup (volume) or 1/3 ounce (weight)

\*\* 1/3 cup (volume) or ½ ounce (weight)

\*\*\* ¾ cup (volume) or 1 ounce (weight)

\*\*\*\* Refer to Food Buying Guide “Grains and Breads” for equivalent quantities

## ADULT CARE MEAL PATTERN

The meals served to adult participants in the Child and Adult Care Food Program shall contain the indicated meal pattern quantities and food components in order to qualify for reimbursement. Adult centers may choose to implement the “offer vs. serve” option (as described on following page).

| <b>Breakfast</b>  |  | <b>Adult Participants</b>  |
|---|--|--|
| <b>Milk</b> , fluid<br><b>Juice or fruit or vegetable</b><br><b>Bread and/or cereal*</b><br>enriched or whole grain<br>Bread or<br>Cereal: Cold dry or<br>Hot cooked  |  | 1 cup (8 ounces)<br>½ cup<br><br>2 slices (or 2 servings the equivalent quantity of 2 ounces)<br>1½ cups (or 2 ounces)<br>1 cup  |
| <b>AM or PM snack (supplement)</b>  |  |  |
| (select 2 of these 4 components)<br><b>Milk</b> , fluid<br><b>Meat or meat alternate</b><br><b>Juice or fruit or vegetable</b><br><b>Bread and/or cereal*</b><br>enriched or whole grain<br>Bread or<br>Cereal: Cold dry or<br>Hot cooked   |  | 1 cup (8 ounces)<br>1 ounce<br>½ cup<br><br>1 slice (1 ounce)<br>¾ cup (or 1 ounce)<br>½ cup   |
| <b>Lunch or Supper</b>  |  |  |
| <b>Milk</b> , fluid<br><b>Meat or meat alternate</b><br>(lean meat or poultry or fish)<br>Cheese<br>Egg<br>Cooked dry beans or peas<br>Peanut butter<br>Yogurt (plain or flavored)<br>(Or an equivalent quantity of any combination of the above meat/meat alternates)<br><b>Vegetable and/or fruit</b><br>(total of <u>two</u> or more)<br><b>Bread or bread alternate*</b><br>enriched or whole grain |  | 1 cup (8 ounces) - (none required at supper meal)<br><br>2 ounces<br>2 ounces<br>1 large egg<br>½ cup<br>4 tablespoons<br>1 cup<br><br>1 cup<br><br>2 slices (or 2 servings the equivalent quantity of 2 ounces) |

\* Refer to Food Buying Guide “Grains and Breads” for equivalent quantities